PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10827201

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			45	45					RATE	FEE	٦	RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA			BASIC FE	+	OA	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			45 minus 20=		. 25			XS 9=		OR	X\$18=	450.0	
INDEPENDENT CLAIMS			& minus 3 =		· 3			X43=	Ì	OR	· X86=	828.0	
MULTIPLE DEPENDENT CLAIM PRESENT									+145=		OR	+290=	
•'1	10 1 Y 1 the difference	e in column 1 is		zero, enter "0" in column 2			2	Ł	TOTAL		OR	TOTAL	14780
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)							nn 3)		SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESI	ENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total 45	• 45	Minus	- 20	2	<i>- Z</i>	25		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MI	Minus	en g		<u> </u>			X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+145=		OR	+290=	
							Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum		Colum	ın 3)			•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	JSLY	PRESE			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**					X\$ 9=		OR	X\$18=	
	Independent	• NTATION OF MU	Minus	m		•		Γ	X43= .		OR	X86=	
	TINOT PRESE	INTATION OF MIC	LIFE DEP	ENDENT	LAIM			Γ.	+145=		OR	+290=	
								AD	TOTAL DIT. FEE	·	OR A	TOTAL DDIT. FEE	
		(Column 1)		(Column	12) (Columi	n 3)	٠.	•	•			•
S INI		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA				ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••	=	E		5	K\$ 9=		OR	X\$18=	
5	Independent		Minus	MOENT C				7	X43≃		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= OR +290=												+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE													
T	ine "Highest Number Highest Number 1	nber Previously Paid per Previously Paid	For (Total or i	SPACE is le ndependent)	ess than 3 is the hip	, enter * ghesi nu	3." mber fo	bund	in the appri	opriste box		•	